

## **Mental Health Oversight Advisory Council**

March 20 – 21, 2008

### **Minutes**

Members Present: Joan Daly; Mary Dalton; Joyce De Cunzo; Leslie Edgcomb; Jim FitzGerald (Chair), Keith Foster, Bill Hodges, Andy Hunthausen, Ester Kramer, Treat Lear, Dorothy McCartney; Marty Onishuk, Gerald Pease, Tom Peluso, Karen Ward (Vice Chair), Patrick Wayne

Members Excused/Absent: Gary Hamel, Suzanne Hopkins, Bob Jahner, Frank Podobnik, Gary Popiel, Jo Shipman, Lenore Stiffarm, Dan Weinberg

**Approval of Minutes:** Motion made and approved. HODGES/ Kramer

### **Purpose of Council – Jim FitzGerald**

- Statutory role of Council reviewed. Although advisory, the Council has oversight and advocate responsibilities for Montanans with psychiatric disabilities.
- Legislative Focus Summary provides opportunity to prioritize and make recommendations to DPHHS (Department).
- As Oversight body MHOAC needs comprehensive and dynamic reports from Department that provide relevant information on the progress and compliance with the AMDD Block Grant/State Plan.
- Department Reports serve as tool for MHOAC to make recommendations and advocate for improved systems and maximize existing and new dollars.
- Council can influence and provide leadership without authority.
- **Action:** Development Committee propose Department Reports format to full Council.

### **Executive Planning Process – Joyce De Cunzo –March update of new program initiatives attached**

- Overview and timelines provided.
- Approximately 2.5M available to AMDD for new proposals (one year) at this time.
- Took plans from SAAs, Listening tour, Legislative Focus Summit to develop priorities.
- Safety and support of current programs are foremost in considerations.
- End of April target date for more definitive information.
- AMDD Priorities include:
  - Provider rate increase first priority.
  - Secure an APRN position for MCDC - Modified to permanent
  - About 1.3 M after infrastructure priorities for new program development
  - Crisis stabilization – not 72-hour which is in present law - would be development dollars for providers to enhance development of secure crisis stabilization beds.
  - Automated Prescription management system for Montana State Hospital.
  - Statewide Peer Certification Training - certified peers that can leverage general fund and Medicaid dollars.
  - Two FTE to support data system needs – TIER – electronic records

- RN and two case manager FTEs at MCDC
- CIT training for rural/frontier areas. Consider mobile training where training is offered in community. Training would be co-occurring based using forms of technology and face-to-face formats.
- Facility maintenance – institutions need some repair.

## **Department Reports**

### **Health Resources Division – Mary Dalton**

- Concerns expressed regarding amount of time State representatives have to provide complete information on all aspects of Division.
- The Health Resources Division must address mental and physical health for children and adults.
- Agenda needs to be relevant to Children's Mental Health Bureau prior to dedication by Bureau to participate.
- CMHB has own planning processes – may be incorporated into MHOAC process. Both are driven by statutory requirements.
- Focus on transitions aged youth may be good place to start incorporating CMHB planning and oversight with MHOAC in a meaningful way.
- Centers for Medicaid and Medicare Services (CMS) continue to pursue 'unbundling' of services. Congressional moratoriums being initiated on systemic changes to CMS program.
- Medicaid Targeted Case management rule (one case manager for multiple program interventions) maintained.

### **Children's Mental Health Bureau – Bonnie Adey – (report attached)**

**Proposal:** Use May 16 MHOAC meeting as venue for adult – children program planning opportunity. Executive Committee will discuss.

**Proposal:** Target Block Grant dollars on transitions (youth to adult – 16-24 years of age) services.

**Action:** Bonnie will provide a directory of Systems of Care Statutory and Community Committees and KMAs to the Council.

### **Mental Health Ombudsman – Eve Franklin (report attached)**

### **Legislative Focus Summit – Karen Ward**

- Summit was well attended; included broad-spectrum of groups affected/impacted by mental health concerns.
- Groups different although had shared values
- Group agreed on top priorities: (List from summit document)
- Value in follow up including a press release to inform and promote public awareness, especially for those agreed upon top priorities.
- Correlate follow up documents to EPP and MHOAC activities.

- Consider opportunity for input from public on Summit process. Look for opportunities to continue involvement, input and promotion of public process.
- Copy of Summit summary sent to all participants with mailing address; Legislative Interim Committee on Children and Families.
- Recommend the Council wait to make Summit follow up recommendations or ideas to the Department until the budget process is further along.
- Would like to get priorities to Governor prior to November 20 deadline for completion of Governor's Budget.

**Motion:** To accept the Mental Health Legislative Focus Summit Summary as the principal document for the 2009 Mental Health Executive Planning Process and Legislative Initiatives. DALY/Hodges

**Motion:** The Council will work with AMDD staff to draft a letter to the Governor requesting an endorsement of MHOAC priorities and continued collaboration with the Council. The letter will be drafted and sent to the Chair for revisions and signature. HUNTHAUSEN/Kramer. Motion passed.

**Motion:** Executive Committee Chair and Vice Chair will work with AMDD Staff to get follow up letter and/or press release out. HUNTHAUSEN/ Kramer

#### **May 21 – General Discussion Points:**

- MHOAC desire to build infrastructure for children's issues and funding.
- Standing reports: Include AMDD chemical dependency report
- Develop customized report format for "Standing" Reports that will provide MHOAC status, challenges, outcomes and budget information.
- MHOAC activities should revolve around EPP and Legislative calendars.
- **Action:** Development Committee will work on customized report format for Standing Reports.
- **Action:** Development Committee working on MHOAC membership. Carol will provide a list of slots that need to be addressed. A Letter To Apply is being drafted.
- **Action:** Taskforces and Standing Committees: Develop report format that will reflect cradle to grave goals/process; provide status, challenges, outcomes with timelines for completion. Use Legislative Summit and road map.
- **Action:** Recommend bringing in information witnesses, on topics related to mental health, strategic planning and/or of interest, to ensure the Council has the information they need to make informed choices/decisions.

#### **Governor's Transitions Workgroup – Lily Sobolik, Governor's Office**

- Governor Office appointed workgroup charged to study and problem solve "Transitions for Youth" issues such as gaps in service related to eligibility, collaboration among agencies, etc. (see attached letter)
- Taskforce crosses state government and partners with community service and advocacy agencies.
- Looking to ensure options for youth with disabilities mimic those for youth without disabilities.

- Transitions Conference to be held in September – if interested [e-mail - mylfjune@bresnan.net](mailto:mylfjune@bresnan.net)
- Website will be available sometime in May 2008.

### **Standing Committee Reports – See attached.**

#### **Points of Discussion:**

- Coordination and collaboration with SAAs to ensure SAAs and MHOAC are collaborating and coordinating while being true to their individual missions/goals.
- “Weinberg” Group is coming to a close. May be recommending a non-traditional managed care model.
- MHOAC would like a ‘Concept Diagram’ – What does the mental system look like.
- **Action:** Joan Daly will provide a draft concept diagram.
- **Action:** Forward membership application to all those individuals on Legislative Summit sign in sheet w/cover letter from Chair of MHOAC inviting distribution to appropriate potential candidates – based on available slots.

### **Block Grant Update, Recovery Markers – Allison Hwong, AMDD**

- Integration of data using recovery markers for Block Grant data
- Can data provide information on cost for level of recovery – are services structured for diagnosis or a cookie cutter approach.
- Youth/young adult transitions services priority for any Block Grant dollars designated for children’s services.
- Ensure consideration for current services provided through adult mental health providers and ‘backfill’ for changes to adult mental health appropriations/contractual agreements
- **Action:** Joan will connect with Allison and Jami Stolte on 72-Hour presumptive eligibility and other data sets (children and adult).
- Integration of children’s service needs in use of Block Grant dollars.
- **Action:** Initiate discussion with Department Administrators and Council on contracting Block Grant dollars.